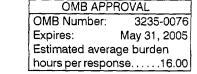
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D





NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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1	Prefix		Serial
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0403881/ (check if this is an amendment and name has changed, and indicate change.)	
Rivertown-Ono OSCP1 LLC Units Offering Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE STREET
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	1111 2 6 7004 >
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	179
Rivertown-Ono OSCP1 LLC	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
1266 West Paces Ferry Rd., #181, Atlanta, Georgia 30327 Address of Principal Business Operations (Number and Street, City, State, Zip Code)	(678) 904–9400 Telephone Number (Including Area Code)
(if different from Executive Offices)	PROCESSED
Brief Description of Business	JUL 28 2004
Real Property Investment (Single Parcel)	THOMSON
Type of Business Organization	FINANCIAL
☐ corporation ☐ limited partnership, already formed ☐ ☑ other (p ☐ business trust ☐ limited partnership, to be formed	lease specify): limited liability
Month Year	company
Actual or Estimated Date of Incorporation or Organization:	
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D o 77d(6).	r Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering, and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 205	549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	y signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously suppleted with the SEC.	
Filing Fee: There is no federal filing fee.	
State:	
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for st ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Stare to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law. this notice and must be completed.	ecurities Administrator in each state where sales the exemption, a fee in the proper amount shal
ATTENTION	
Failure to file notice in the appropriate states will not result in a loss of the federal ex appropriate federal notice will not result in a loss of an available state exemption unles filing of a federal notice.	

		A. BASI	C IDENTI	FICATION DATA	i lei l	J.		
2. Enter the information re	•	•						
•	,	suer has been organis		,				
				•				ss of equity securities of the issue
		f corporate issuers as		orate general and ma	naging	partners of	partn	ership issuers; and
• Each general and i	nanaging partner o	of partnership issuers						
Check Box(es) that Apply:	Promoter	Beneficial Ow	vner [Executive Officer		Director		General and/or Managing Partner
Ornstein, Matt								
,	,	#101 361		a	207			
1266 West Pace Business or Residence Addre				Georgia 303	321			
Check Box(es) that Apply:	> Promoter	Beneficial Ow	vner	Executive Officer		Director		General and/or Managing Partner
Schuler, Frank Full Name (Last name first, i	if individual)							
,	,	#101 341 -			~~			
1266 West Paces Business or Residence Addre				eorgia 3032	21			
Check Box(es) that Apply:	Promoter	Beneficial Ow	vner [Executive Officer		Director	X	General and/or Managing Partner
Ornstein-Schule Full Name (Last name first, i		Partners LL	C		 -			
1266 West Paces Business or Residence Addre				Georgia 303	327			
Check Box(es) that Apply:	Promoter	Beneficial Ow	ner 📋	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)				-			
Business or Residence Addre	ss (Number and	Street, City, State, Z	ip Code)					
Check Box(es) that Apply:	Promoter	Beneficial Ow	ner 🗍	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)							
Business or Residence Addre	ss (Number and	Street, City, State, Z	ip Code)		·			***************************************
Check Box(es) that Apply:	Promoter	Beneficial Ow	ner	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)							
Business or Residence Addre	ss (Number and	Street, City, State, Z	ip Code)					
Check Box(es) that Apply:	Promoter	Beneficial Ow	ner 📋	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)		-					
Business or Residence Addre	ss (Number and	Street, City, State, Z	ip Code)					
	(Hee blat	nk sheet, or conv and	l use addit	ional conies of this s	heet as	necessary)	· · · · · ·	

Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? S		16.4	646.74			В. І	NFORMAT	ION ABOU	T OFFERI	NG			A De	
Answer also in Appendix, Column 2, if filing under ULOE 2. What is the misimum investment that will be accepted from any individual? 3. Does the offering permit joint ownership of a single unit? 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, its the name of the broker or dealer. If more than five (3) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	1	Has the	issuer solo	l or does t	he issuer i	ntend to se	ll to non-a	ccredited i	nvestors in	this offer	ing?			
2 What is the minimum investment that will be accepted from any individual? Yes No 3. Does the offering permit joint ownership of a single unit? Set No. 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer eigstered with the Set2 and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	1.												<u>A</u>	
3. Does the offering permit joint ownership of a single unit?	2.									\$ 26	,170			
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated persons or agent of a broker or dealer registered with the SFC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, or dealer, our may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)												Yes		
commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the Offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a stocker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "Al) States" or check individual States)	3.	Does th	e offering	permit join	t ownershi	p of a sing	le unit?				***************************************		X	
Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) AL AK AZ AR CA CO CT DE DC FL GA HI ID II. IN IA KS KY LA ME MD MA MI MN MS MO MT NE NV NH NI NM NY NC ND OH OK OR PA RI SC SD TN TX LT VT VA WA WV WI WY PR Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) All AK AZ AR CA CO CT DE DC FL GA HI ID II. IN IA KS KY LA ME MD MA MI MN MS MO MT NE NV NH NI NM NY NC ND OH OK OR PA RI SC SD TN TX LT VT VA WA WV WI WY PR Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers States in Which Person Listed Has Solicited or Intends to Solicit Purchasers States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		commis If a pers or states	sion or sim son to be lis s, list the na	ilar remune ted is an ass ame of the b	ration for s sociated pe roker or de	solicitation rson or age ealer. If me	of purchasent of a brokers ore than five	ers in conne ker or deale e (5) persoi	ection with r registered is to be list	sales of sec I with the S ed are asso	curities in t SEC and/or	he offering with a state	:	
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Full	Name (Last name	first, if ind	ividual)									
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Busi	iness or	Residence	Address (N	lumber and	f Street, C	ity, State, 2	Cip Code)						
(Check "All States" or check individual States)	Nam	ne of Ass	sociated Br	oker or De	aler									
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Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Full	Name (Last name	first, if ind	ividual)									
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(Check "All States" or check individual States) AL AK AZ AR CA CO CT DE DC FL GA HI ID IL IN IA KS KY LA ME MD MA MI MN MS MO MT NE NV NH NJ NM NY NC ND OH OK OR PA RI SC SD TN TX UT VT VA WA WV WI WY PR Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	Nam	ne of Ass	sociated Br	oker or De	aler					-				
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States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	Busi	iness or	Residence	Address (1	Number an	d Street, C	ity, State,	Zip Code)					·	
	Nam	ne of Ass	sociated Br	oker or De	aler									
(Check "All States" or check individual States)	State	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers	·					
		(Check	"All States	" or check	individual	States)			•••••		***************************************		☐ Al	l States
AL AK AZ AR CA CO CT DE DC FL GA HI ID		AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
IL IN IA KS KY LA ME MD MA MI MN MS MO														
MT NE NV NH NJ NM NY NC ND OH OK OR PA RI SC SD TN TX UT VT VA WA WV WI WY PR														

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount alread sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange an already exchanged.	k			
	Type of Security		Aggregate fering Price	Am	nount Already Sold
	Debt	. \$	0	\$	0
	Equity			\$	0
	Common Preferred				
	Convertible Securities (including warrants)	. \$_	_0 _	\$	0
	Partnership Interests	. \$	0	\$	0
	Other (Specify	. \$2.	113,028,74	\$ 2	113,028,74
	Total				
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in thi offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicat the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	e r	Number Investors		Aggregate bllar Amount f Purchases
	Accredited Investors		28	\$ 2	2,113,028.74
	Non-accredited Investors		0	\$_	0
	Total (for filings under Rule 504 only)		N/A	\$	N/A
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.				
	Type of Offering		Type of Security	D	ollar Amount Sold
	Rule 505	N	VA	\$_	0
	Regulation A	N	I/A	\$_	0
	Rule 504	N	I/A	\$_	0
	Total	N	I/A	\$	0
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	•.			
	Transfer Agent's Fees	• • • • • • • • • • • • • • • • • • • •		\$	0
	Printing and Engraving Costs			\$	850.00
	Legal Fees			\$ <u>1</u>	0,000.00
	Accounting Fees			\$	8,400.00
	Engineering Fees			\$	_0
	Sales Commissions (specify finders' fees separately)			\$	0
	Other Expenses (identify)			\$	0
	Total			\$ <u>1</u>	9,250.00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	and total expenses furnished in response to Part C— proceeds to the issuer."	- Question 4.a. This difference is the "adjusted gro	SS		\$ 2,09	3 , 778.74
5.	Indicate below the amount of the adjusted gross preach of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Par	ny purpose is not known, furnish an estimate a of the payments listed must equal the adjusted gro	nd			
			Di	yments to Officers, rectors, & ffiliates	-	ents to
	Salaries and fees		🗀 \$_1	83,986	\$()
	Purchase of real estate		🔲 \$_	0	_ [\$ <u>1,</u> 8	<u>839,86</u> 0
	Purchase, rental or leasing and installation of ma	chinery	🔲 \$_	0	\$	<u> </u>
	Construction or leasing of plant buildings and fac-	cilities	🔲 💲	0	. 🗆 \$()
	Acquisition of other businesses (including the va offering that may be used in exchange for the ass issuer pursuant to a merger)	sets or securities of another	□\$	0	□\$ ()
	Repayment of indebtedness				_)
	Working capital		[] \$_	0	☐ \$ <u></u>)
	Other (specify): Insurance on Real					
	Real Property Purchase Trans	saction Costs	[] \$_	0	□\$63,	932.74
	Column Totals		🗆 \$1	83,986	\$ <u>1,</u> 9	09,792.7
	Total Payments Listed (column totals added)		••	<u> \$2 </u>	093,778	}.74
		D. FEDERAL SIGNATURE				
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fu information furnished by the issuer to any non-acc	rnish to the U.S. Securities and Exchange Comm	nission,	upon writte		
Iss	uer (Print or Type)	Signature	Date	1.		
R	ivertown-Ono OSCP1 LLC	talastas Pronote		7/40/0	94	
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)	_ : -	7		
	cank Schuler	Promoter of Rivertown-Ono				

- ATTENTION ----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)